

PTO/SB/01 (04-05)

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	
Filing Date	
First Named Inventor	HALL, Peter
Title	Tiro Pressura Estimation
Art Unit	
Examiner Name	
Attorney Docket Number	0100508/0538461

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioner(s) associated with this Customer Number:

25874

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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Country

Telephone

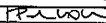
Email

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	2006-02-02
Name	Peter Hall	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 5 forms are submitted.

This collection of information is required by 37 CFR 1.91, 1.92 and 1.93. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/1 (04-05)

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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

**POWER OF ATTORNEY
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CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	
Filing Date	
First Named Inventor	HALL, Polar
Title	Tire Pressure Estimation
Art Unit	
Examiner Name	
Attorney Docket Number	0100508/0538461

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City

State

Zip

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I am the:

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☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/006)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Tony Gustavsson</i>	Date	2006-01-30
Name	Tony Gustavsson	Telephone	
Title and Company			

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Filing Date	
First Named Inventor	HALL, Peter
Title	Tire Prosauro Estimation
Art Unit	
Examiner Name	
Attorney Docket Number	D100508003441

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28974

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Address

City

Country

Telephone

State

Zip

Fax

E-mail

I am:

☒ Applicant/Inventor,

☐

Assignee of record of the entire interest, See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/06)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Peter D. Schlegel</i>	Date	Feb. 10, 2006
Name	Peter D. Schlegel	Telephone	466 733 50018
Title and Company	NRA Dynamics		

NOTE: Signatures of all the inventor or assignee of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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PTO/SB/91 (04-00)
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**POWER OF ATTORNEY
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Application Number	
Filing Date	
First Named Inventor	HALL, Peter
Title	Tire Pressure Estimation
Art Unit	
Examiner Name	
Attorney Docket Number	0100506/0538461

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OR

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Address			
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I am, I/ho:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Fredrik Gustavsson</i>	Date	2006-02-02
Name	Fredrik Gustavsson	Telephone	
Title and Company			

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Application Number	
Filing Date	
First Named Inventor	HALL, Peter
Title	Tire Pressure Estimation
Art Unit	
Examiner Name	
Attorney Docket Number	0100508/0538451

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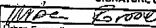
<input type="checkbox"/> Firm or Individual Name			
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Country			
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	Email		

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☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/06)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	Urban Forsell	Date	31.01.06
Title and Company			
	Telephone		

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